AFFIDAVIT FOR MODIFICATION OF HOME WITH A PRIVATE ONSITE WASTEWATER TREATMENT SYSTEM

Provide a legal land description or attacl	n copy:		
	RECORDING ARE	EA	
	After Recordin	ng Return To:	
Property Location:1/4,1/4, Set # Subd. Name	ection(s) Township	North, Range East	
Lot # Block # Subd. Name CSM # Township, Jefferson County, WI Parcel/PIN #			
Property Address			
(I), (We)			
Owner(s) Name(s) (Print)	Owners(s) Signature(s)	Date	
Subscribed and sworn to before me this	date:		
		, Notary Public	
		County, Wisconsin	
	My Commission expires:	My Commission expires:	
This instrument was drafted by		_on	
	(Owner's Name)	(Date)	